

# Committee on Financial Services

## Internship Application

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Political Affiliation: \_\_\_\_\_

### Permanent Home Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Day Phone: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### Present School:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School Phone: (\_\_\_\_) \_\_\_\_\_

\_\_\_ Freshman; \_\_\_ Sophomore; \_\_\_ Junior; \_\_\_ Senior; \_\_\_ Fifth Year; \_\_\_ Grad Student

MAJOR: \_\_\_\_\_ MINOR: \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_

Graduate Programs: \_\_\_\_\_

### Internship:

Semester you are interested in working:

\_\_\_\_\_ Spring; \_\_\_\_\_ Summer; \_\_\_\_\_ Fall; \_\_\_\_\_ Winter

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Areas of Interest: \_\_\_\_\_

### Office Skills:

Computer Skills: \_\_\_\_\_